

REMARKS

The Examiner has acknowledged Applicants' amendment to the claims, mailed September 25, 2006 [*sic* March 26, 2007]. However, the Examiner has deemed Applicants' response to the Office Action to be non-responsive. The Examiner contends that Applicants' amendment presents new claims that recite a method of treating a particular species of disease, *i.e.*, "peripheral T-cell lymphoma which is not a cutaneous T-cell lymphoma," which is patentably distinct from the species of disease that Applicants elected and received a first action on the merits concerning, *i.e.*, "peripheral T-cell lymphoma" and "anaplastic large cell lymphoma." In particular, the Examiner notes that in the listing of claims filed with the election of July 21, 2006, Applicants assigned the "withdrawn" status identifier to claim 16, a dependent claim, which recited ". . . wherein said T-cell malignancy is not a cutaneous T-cell lymphoma." Accordingly, the Examiner contends that the amendment of March 26, 2007, canceling all claims drawn to the elected invention and allegedly presenting only claims drawn to a non-elected invention, is non-responsive.

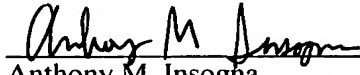
Applicants respectfully assert that the new claims presented in the amendment of March 26, 2007 are drawn to an elected invention and are responsive. In the Office Action mailed October 24, 2006, the Examiner states that "peripheral T-cell lymphoma" refers to "'malignant lymphoproliferation of T cells of post-thymic origin in differentiation (peripheral T cells)' and encompasses at least eight distinct entities *including cutaneous T-cell lymphoma*, mycosis fungoids, Sezany [*sic* Sezary] syndrome and anaplastic large cell lymphoma." October 24, 2006 Office Action, at 6, 5th full paragraph (citing Au *et al.*, Curr. Oncol. Rep. 4(5): 434-42 (2002); referred to as "Au"). The Examiner then states that, for purposes of prior art examination, he is interpreting the term "peripheral T-cell lymphoma" to include the eight disease entities taught by Au (namely, Leukemic/Disseminated Group (including T-cell prolymphocytic leukemia, T-large granular lymphocyte leukemia, aggressive NK-cell leukemia, adult T-cell leukemia/lymphoma); Cutaneous Group (including mycosis fungoides and Sezary syndrome, primary cutaneous CD30⁺ T-cell lymphoma and lymphomatoid papulosis); Extranodal Group (including nasal/nasal-type NK/T-cell lymphoma and leukemia, subcutaneous panniculitis; enteropathic and hepatosplenic T-cell lymphoma); and Nodal Lymphoma (including angioimmunoblastic lymphoproliferative disease, anaplastic large cell lymphoma with anaplastic lymphoma kinase expression, and peripheral T-cell lymphoma, unclassified). October 24, 2006 Office Action, at 6, 6th full paragraph.

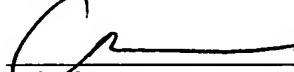
The new claims presented in the amendment of March 26, 2007 are directed to a subclass of disease entities encompassed by the term "peripheral T-cell lymphoma" (namely, disease entities other than cutaneous T-lymphoma). Applicants respectfully submit that the selection of a subclass of disease entities encompassed by the term "peripheral T-cell lymphoma" would not require additional searches since the Examiner has already searched for the class of disease entities encompassed by the term. Therefore, Applicants respectfully submit that the new claims presented in the amendment of March 26, 2007 are drawn to an elected invention and are responsive.

Entry of the remarks made herein is respectfully requested. The Examiner is invited to contact the undersigned with any questions concerning the foregoing.

Respectfully submitted,

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